

HCPF Person- and Family-Centered Approach: Creating a Culture of Collaboration with Clients

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Transcription of our Stakeholder Meeting

Carrie Cortiglio – Person- and Family-Centeredness Core Team Member Deputy Director of our Policy, Communications and Administration

Good afternoon. I'm Carrie Cortiglio, I'm the Deputy Director of our Policy, Communications and Administration office at HCPF. Thanks so much for joining us today.

I just want to cover a few logistics before we get started because we have people in the room, we have folks joining via webinar and we have people on the phone. We are recording the webinar. Any questions that come in via chat or questions that we don't get to answer will be [unintelligible] and we'll create a document that lobs the questions and provides written answers and we'll be posting that on our website. Similarly, if folks in the room have questions or comments that we don't get to, there's a feedback form, it's the bottom sheet in front of you. So any questions that we don't get to, you can throw them on there and we'll create a document with written answers. We'll let everyone know who has RSVP'd when that document is ready to be posted. We have a pretty packed agenda.

We are here today because we have spent a lot of time over the last couple of years at HCPF trying to become an organization that integrates a person-centered approach into everything that we do. We've made some progress, but there's still work to do. At this meeting today, we want to share out the work that we've done. A lot of it has been internal work on the Department side. And then we want feedback from everyone on how we can leverage that work to move into the next phase of this. Our ultimate goal is to make sure that a person-centered approach is felt by all our clients when they're interacting with us, when they're interacting with our contractors, and when they're interacting with our providers.



One of the first things that we did as a Department was create a definition of person-centeredness so that we have a shared understanding across all Department employees about what we meant. For us, being person-centered has meant respecting and valuing an individual's preferences, strengths, and contributions. It's about doing things with our clients instead of to or for them.

I want to just take a couple minutes to talk about how we got here – a little bit of history. We've been at this for a little while. The Colorado Health Foundation brought the Institute for Patient- and Family-Centered Care (IPFCC) to the Department a few years ago to do a three-day site visit. They did a lot of interviews both with internal staff and external stakeholders and created a written report with a lot of recommendations. The Department looked at all those recommendations and we created a fairly large grant request to the Health Foundation. We got that grant in July of 2013 and started on this journey. And we joke that it is person-centeredness without a roadmap - but for us, it really has been a little different. There's a lot of work that has been done around being patient-centered, but that's some work that's been done by organizations that usually have direct contact or do direct service - like hospitals. The Department, as far as we know, is actually the first public health insurance payer that's attempted to integrate this principle into what we do. And it's been a little challenging along the way. Most of our organization just doesn't have any contact with clients. So we had to look around a little bit to create some models.

We did look at the Cleveland Clinic that instituted a huge effort to become much more patient-centered. We modeled a lot of our work on what they did to move this effort along. We also talked to an organization called CareOregon, which is a Medicaid Managed Care Organization, to get some ideas about successfully launching and maintaining a client Advisory Council.

We've had some great partnerships. The Colorado Health Foundation has been really supportive and flexible because the more we got into this the more our thinking evolved. The more we learned, the more we've had to course-correct and try things, and they've been a really great thinking partner. We also hired The Civic Canopy to do a lot of the facilitation.

This is the real road to person-centeredness for HCPF – it's got a lot of switchbacks. Like I said, over the course of the grant, we would learn and our thinking would evolve. The original grant was about client engagement and it had a lot of fairly concrete and tactical deliverables - things like re-designing our website with a lot of client input so that it's easier to navigate. Those things are all important and we did those, but we realized that we really had to shift the thinking of our whole organization to put clients at the center of what we do. We can engage with clients, but that doesn't necessarily



mean involving them on the front end and integrating their preferences, values, and experiences. So this is really a mind shift for much of the Department, although I do want to be clear. The Department was in some different places, our Office of Community Living really understood this conceptually and got it, and all of their employees are trained in person-centeredness, but then we had other places in the organization that may have struggled a little bit to wrap their heads around 'what does this mean for me if I work in accounting and I never see the client.' So we've had buy-in that's varied across the organization, but it's really helped that our Executive Director has kept this at the forefront, and we've had a lot of help.

We talk about it sometimes as creating a culture at HCPF that values employees, and that was a hugely important part of the effort to really get that internal buy-in. We really had to help employees get the connection between the work that they do every day and the way that they ultimately impact our clients, because everyone ultimately impacts clients. The internal work was really foundational and important.

Once we had clarity on what the work should be we had to figure out how to operationalize it. So we hired The Civic Canopy - they were our main partner. They created the interactive, collaborative process between our Executive Team, our internal employee Champions of this effort, and our newly created Advisory Council. All three groups worked together to create a strategic plan to get us to our goals.

Like I said, leadership was a really key piece of this. Our Executive Director Sue Birch talks about person-centeredness just about every time she's in front of employees to really help folks make that connection. We've had Office Directors throughout the organization create letters and videos to share perspectives and personal experiences. Really importantly, we've gathered a group of internal champions. This is a group of about 30 people across the organization that serve as messengers and liaisons for us to bring work back to their sections or teams to provide input on our strategic plan to give input on changes. They were really critical.

I'm going to stop and turn over to Colleen Daywalt to talk in more detail about the implementation of our Advisory Council.

**Colleen Daywalt – Person- and Family-Centeredness Core Team Member
Stakeholder and Client Engagement Strategy Manager**

Thank you, Carrie. I serve as one of the co-chairs for our Person-Centered Advisory Councils. We actually have created two. We learned very quickly that we needed two mechanisms for people to provide input for the Department. We have an In-Person opportunity but then also a Virtual opportunity. It's difficult as you can imagine to touch all four corners of Colorado and so we created a Virtual chance for folks to provide us feedback. Both of our Advisory Councils have about a dozen individuals from



across the state who participate. The In-Person Advisory Council has 11 people on there and we do have one of the most recent photos from our February 9th meeting. We have a few of our folks there that join us in person. So we have mix of clients or recipients of Medicaid and Child Health Plan *Plus* as well as their parents or caretakers who are represented on the Advisory Council.

We are constantly recruiting new members for the Advisory Councils, so I'm going to do a little shameless plug for everyone on the phone and in the room. If you know of an individual who might be interested in participating either in person or virtually, we would love to hear from them. We have an application that you can find on our website and additionally more information like a position description. So if you know of a client that would be interested in dedicating more time and donating their time to our work, please let us know, we are always looking for more participants.

I have here on the screen just a few of the opportunities or ways that our Advisory Council has provided feedback to the Department. We found it very important to not only to engage them on projects that were near launch, so actually testing messages or testing how do talk about this new initiative to clients, but we also thought it was important to engage them in projects that are in more formative stages. This is a very small snapshot – the list is much longer. But two of the things that I want to highlight for you all is – as Carrie mentioned – one of the efforts that we use some of our person-centeredness efforts to support is to revamp our Department website. And one of the ideas that came out of discussions from the Advisory Council is the need to have a feedback form directed just to clients on how they can provide feedback on our website. So we developed that survey with the Advisory Council and have posted that on our website on the pages that are more geared toward clients. We receive tremendous feedback on that and actually we use that information, we check that email address multiple times a day and make tweaks in real time based on the feedback from clients. It's very reassuring that even something as small as a feedback form, we're able to constantly refine the information we have on our website.

One of the efforts that the Advisory Council members played a really big part in was developing our Person-Centeredness Strategic plan. They helped us from the beginning identify 'what are the key pillars that need to be in the strategic plan?' As Carrie mentioned, employee engagement was something that we realized very quickly we need to make sure we harness and get folks internally on board before we start working externally. So the Advisory Council along with our internal Champions and leadership within the Department identified Employee Engagement, Employee Commitment to the Client and to One Another, as well as Client Engagement and Client Experience as being the key pillars that are within our Strategic Plan. And the three groups worked iteratively to develop the plan that we have now.



We have a lot of work that still continues both internally as well as externally. We're working to implement our Strategic Plan and we will continue to work on that for the years to come. But what we want to transition to now is some of our more external work. And that's why we have you all here in the room, on the phone and via webinar to get your feedback. We realize that now we are starting to move forward in some of these efforts to really integrate and sustain person-centeredness within the Department, we recognize it's very important to engage providers, vendors, and our contractors, and our partners that work on behalf of the Department in this work as well. So what we want to do today and there will be discussion later and opportunity for you all to share is to get your feedback on where do you think we can make the most impact on the client experience by extending person-centeredness outside of the Department?

Panel members are introduced:

Emily Dewey - Internal Champion
Provider Performance Analyst, Financial Analytics Unit

I'm Emily Dewey. I'm a data analyst in the Finance Office at HCPF and I was part of the Champions group within the Department, trying to figure out how to integrate person-centeredness into our work at the Department. As an analyst in the Finance Office, it was really hard for me to figure out how that would be a part of what I do on a daily basis. I have no contact with clients. I'm sort of the [unintelligible].

It took quite a few sessions with Civic Canopy, who was a great facilitator, to really help me figure out what my role could be. Eventually we decided that – myself and my team – the way that we could be person-centered is - we're using a new software in the Department and the way that we're looking at it is - instead of just a single question: why does this kind of person use this kind of service? We try to look at each section of the Medicaid population and look at their entire utilization and how they're interacting with Medicaid and we're trying to bring in other data of how they interact with other services across the state to really make sure that person is having a good experience on Medicaid and having their needs met based on risk factors or past experiences or that kind of thing, and then we pass that information along to other groups in the Department who do outreach to the client and do the more direct work with that. So that's been my role in person-centeredness.

Liz Henry - Advisory Council member

I'm Liz Henry. I'm a member of the In-Person Advisory Council. I came onto the Advisory Council in October of 2015. I'm a parent of two children who are on CHP+ and had about a year of experiences where I was really trying to figure out the system. It was new to me and it was proving to be very difficult for me to figure out. I at some point documented all of my experiences as I like to do, and said maybe there is



somebody I can send this to and just explain that if this is difficult for me and my background is in education and managing Federal grants at times and things that I feel like are tough systems. If this is hard for me, I can't imagine somebody whose first language isn't English or who doesn't have the time that I do to dedicate to phone calls and all of these activities. So I wrote up a letter and I ended up finding somebody to connect it with, but in the process of trying to figure out who to send that letter to, I came across an application for the Person-Centeredness Advisory Council and I thought maybe this is a way to not just complain about something, but to offer some solutions or be part of trying to resolve some of these challenges for others. So I joined the Council and it has been a great experience. I have heard other council members say – I feel like I can speak for more than just myself when I say - that we do look forward to going each month, we look forward to contributing, to seeing what different departments have for us to look at, and to talk about, and to offer feedback on, and none of us are hesitant at all to give our feedback. The beauty of it is that it's so well-received and so appreciated by those who bring us those activities or messages or whatever it is. One example is that we had somebody who was coming in and showing us both a website and a mobile version of the website and we really picked it apart I felt like. I honestly was sitting in the room thinking to myself, "I feel so bad that they spent so much time on this and here we are." And I in particular was quite vocal about it, and she came to me at the end before she walked out of the room and she put her hand on my arm and she looked me in the eye and she said, "Thank you so much. If you ever need anything, please call me." And that was really powerful to me because it's not just about griping about things or coming in and giving our two cents. It really is well-received. They're taking that information and they're doing things that are improving the experiences of the other clients.

Barbara Ramsey - Division Director, Intellectual & Developmental Disabilities Division

My name is Barb Ramsey and I'm the director at the Division of Intellectual & Developmental Disabilities, and I've had the very great distinct pleasure of working with Director Birch and Carrie Cortiglio and the executive management at Health Care Policy and Financing who are full steam ahead on person-centeredness. Some of you I recognize your faces and I've worked with you over the years and you know that folks in the IDD (Individuals with Intellectual and Developmental Disabilities) world have been working on person-centeredness for many years and it is a huge endeavor to try to infuse a person-centered approach in what is fundamentally a bureaucratic process. Government agencies are by nature bureaucratic. And I know that every day the people I work with are working in our Department because they care about what they do, they care about the job, they care about the people they work with, and they care about the people they support.

I'll give you a quick snapshot of what we've been doing in our own division and then

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just give you a little idea about our next level. Each person who comes to the Division of Intellectual and Developmental Disabilities (DIDD) as well as Long Term Services and Supports (LTSS) which is the other division in the Office of Community Living receives training on person-centeredness. We also have staff who work in local communities at Community Center Boards (CCB) who sponsor bimonthly leadership meetings with case managers, local providers and oftentimes leaders of the local community about person-centeredness: what does that mean, what gets in the way of operating in a person-centered manner in that local community, and our folks participate in those groups and bring that information back to us.

I'd like to say there are two specific items where we really work to implement the person-centered approach from the support that we've actually gotten at the executive level and through the Colorado Health Foundation work. One is in our approach to waiver redesign. For those of you who don't know what a waiver is, Home and Community-Based Services waivers under Medicaid provide support for people with disabilities to live an independent life or as independently as possible in their community, among their family and friends. We serve about 42,000 people (don't quote me on that) in Home and Community-Based Services waivers in Colorado right now. Two years ago, the legislature charged us to redesign those waiver services and in redesigning the waiver services, we met with people who are receiving services and providers and other stakeholders to figure out: how can we best create a person-centered approach for folks, how can people have the most flexibility and greatest choice in the types of services they receive. We will finally be implementing consumer direction for individuals in the IDD waivers. But also, we are changing what used to be a catch-all service called Residential Habilitation to an entire menu of services that allow people to choose which of the services they need. For example, currently people who have Residential Habilitation will receive personal care and supervision all rolled up into this one service. But, a lot of people don't need supervision, so we're changing our waiver so people can select those services they need and they can choose personal care services separate from supervision.

The other is in supported employment and we have worked really hard to empower providers to empower people for supported employment. I have to look at my figures here because I want to tell you that what we've done with our supported employment is work very hard to help people identify what they'd like to do and how they can match their skills and abilities with those things they'd like to do. In the year 2014-2015, we had 106 new people participating in supported employment and what's even better for those of you who know our system, 54 of those people were in individualized work settings. So we're really happy about being able to work with people in a way that doesn't say, "You want supported employment. Ok, we have a space over here and go over there and receive your services." But to [offer] different kinds of services they like.



I mentioned that I wanted to talk about the next level or the next iteration. The whole Office of Community Living is very much focusing on how to support providers and how to support case managers in a person-centered manner to provide for them what they need so that they can support people who receive services. We don't provide direct services. So while we've had a culture that's very much trying to promote person-centeredness for the people who receive services. It dawned us through this work at the agency that where we really need to also support a person-centered approach is with providers, case managers, each other, and other divisions in helping meet their needs and they in turn help to meet ours. Thank you.

Antoinette Taranto – Person- and Family-Centeredness Core Team Member Chief Client Officer

Hi everyone. I'm Antoinette Taranto and I'm the Chief Client Officer for the Department and I will tell you a little bit about how my position was created. Historically – and I've been with the Department for quite some time - the Department's focus is on paying claims. That's basically what our goal and primary purpose was, to pay claims. With the creation of my role, we are shifting to focus on the customer - all of our Medicaid members and Child Health Plan *Plus* members. This initiative that we've been on – this winding road with switchbacks - has been phenomenal to watch [when] people within the organization get the 'aha!' moment, when you see the light come and people say, "Oh, I get it!" It's true – we are all working at this organization because we care about people and we want to do good. This is really giving us an opportunity to shift our focus away from paying claims to the people that we're helping every day.

What I'm doing in my role is really looking across the entire organization - every opportunity that we can take to focus on the customer and say, "Ok, well that's a great idea or policy. Maybe we should bring it to our In-Person Advisory group and get their input and find out more about how would this really impact real people?" Working at that policy level, helping to get folks within the Department actually get honest feedback from real people is wonderful.

The presentation on the website - we very much knew that it needed that person touch. We do have a mobile app that we created and we had about 80 individuals involved in the testing and piloting of it. The mobile app that we created, we created with the purpose of helping people get what they need in situations where you shouldn't have to call us: you need a card, you need to find out about your benefits, you need to find out if you're active, you need to find a provider, those types of things that you shouldn't have to call somebody to get help on. But we are, as Barb said, we are bureaucratic, so [we're] trying to simplify that so that people don't have to pick up the phone and call us for certain things. Now they have what they need at their fingertips.



We are also working on a member handbook so I'm going to do a shameless plug here as well. I am looking for people that are willing to take a look at that and give brutally honest feedback. I want to know what's good, what's bad, what do you need that's missing, all of that good stuff. My card is out there at the table where you signed in. We're going to start the stakeholder feedback in March. So if you reach out to me, I will be able to then put you on the distribution list for that stakeholder feedback. I'm not just looking for members, I'm looking for community partners, advocacy organizations, everyone and anyone that wants to spend time helping us with a member handbook that will actually be meaningful to people. Thank you.

Please see separate [FAQ document for Questions and Answers](#).

For more information contact

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